FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 1:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 739867 (0)

1. Corporation Name

BIG PINE KEY LODGE NO. 1585 LOYAL ORDER OF MOOSE , INC.

Principal Place of Business	Mailing Address
WILDER RD. & 21ST STREET P.O. BOX 749 BIG PINE KEY FL 33043	WILDER RD. & 21ST STREET P.O. BOX 749 BIG PINE KEY FL 33043

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/09/1977
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1706927 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24:
Country — 25:
Zip — 29:
Country — 30:

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature of new registered agent (if registered agent is changed) NOTE: Registered Agent signature required when name changed

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PG	11 TITLE	PG	☒ Change ☐ Addition
NAME	WILDEY, KENNETH	12 NAME	WHITERMORE, FRED	
STREET ADDRESS	RT. 5, BOX 783	13 STREET ADDRESS	P.O. BOX 431623 N/A	
CITY ST ZIP	BIG PINE KEY FL	14 CITY ST ZIP	BIG PINE KEY FL 33043	
TITLE	G	21 TITLE		☒ Change ☐ Addition
NAME	WHITERMORE, FRED	22 NAME	BADMAN, LOUIS	
STREET ADDRESS	P.O. BOX 431623 N/A	23 STREET ADDRESS	RT3 BOX 253R	
CITY ST ZIP	BIG PINE KEY FL	24 CITY ST ZIP	BIG PINE KEY FL33043	
TITLE	T	31 TITLE	TREA	☒ Change ☐ Addition
NAME	NEWMAN, ROYAL	32 NAME	WILDEY, KENNETH	
STREET ADDRESS	P.O. BOX 430729 N/A	33 STREET ADDRESS	RT5 BOX 783	
CITY ST ZIP	BIG PINE KEY FL	34 CITY ST ZIP	BIG PINE KEY FL 33043	
TITLE	T	41 TITLE	TRUSTEE	☐ Change ☐ Addition
NAME	DECKER, JOHN	42 NAME	RUSSELL, PAT	
STREET ADDRESS	RT. 1, BOX 502	43 STREET ADDRESS	RT1 BOX 511A	
CITY ST ZIP	BIG PINE KEY FL	44 CITY ST ZIP	BIG PINE KEY FL 33043	
TITLE	T	51 TITLE	TRUSTEE	☐ Change ☐ Addition
NAME	MORGAN, ARTHUR	52 NAME	SZABO, FRED	
STREET ADDRESS	RT. 4, BOX 1284	53 STREET ADDRESS	P.O. BOX 430247 N/A	
CITY ST ZIP	SUMMERLAND KEY FL	54 CITY ST ZIP	BIG PINE KEY FL 33043	
TITLE	S	61 TITLE		☐ Change ☐ Addition
NAME	CONKRIGHT, RICHARD	62 NAME		
STREET ADDRESS	RT. 1, BOX 660C	63 STREET ADDRESS		
CITY ST ZIP	BIG PINE KEY FL	64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard W Conkright — 4-30-95 — 872-1141
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
RICHARD W CONKRIGHT

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